



PUTNAM COUNTY HEALTH DEPARTMENT  
DIVISION OF ENVIRONMENTAL HEALTH SERVICES  
225-0310  
PROPOSAL FOR SEWAGE DISPOSAL SYSTEM REPAIR

R-118-91

OWNER'S NAME Mahopac Beach PHONE 628 9792  
SITE LOCATION RT 60 TM#   
MAILING ADDRESS Mahopac  
PERSON INTERVIEWED MICHAEL BRUCE & TOM BENVOLLO PCHD Complaint #   
Name & Relationship (i.e., owner, tenant, etc.)  
DATE May 13, 1991 TYPE FACILITY Beach / Rest Room / Rest  
PROPOSED INSTALLER FSD owner PHONE

Proposal (include sketch locating all adjacent wells):

NOTE: Repair must be in same location and of same type as original sewage disposal system. Different location may require submittal of proposal from licensed professional engineer or registered architect.

existing septic tank and leaching area for  
Rest rooms on the East side of property,  
to be repaired and replaced as  
necessary.

All work to be in the same area  
as existing SDS.

- Approval is for repair of existing SDS  
only - no other approvals are implied.

Proposal approved

Proposal Disapproved

Inspector's Signature & Title

Date

Proposal approved with the following conditions:

1. Procurement of any Town permit, if applicable.
2. Submission of as built repair sketch in duplicate showing:
  - a. Owner's name.
  - b. Site Street Name, Town and Tax Map number.
  - c. Location of installed components tied to two fixed points (e.g., house corners).
  - d. System description (e.g., 1250 gal. concrete septic tank, three precast 6' diam. x 6' deep drywells surrounded by one foot + gravel).
  - e. Installer's name and number.
3. System repair to be performed in accordance with the above proposal and conditions.

I, as owner, or reported agent of owner agree to the above conditions.

SIGNATURE

TITLE

DATE

PTES: White (PCHD); Yellow (Town EI); Pink (Applicant)